PERFORM Outcome Measures

CA/N Staff:

1. Timely initial contact with alleged victim child

   - Data Source: Quarterly CA/N Worker Analysis Report provided by the Research and Evaluation Unit
   - Staff goal: % of initial contacts within 24 hrs (or within 72 hrs for Ed Neglect only) = 90% or higher
   - PIP related activity - PIP goal is 90%

   Report includes the names of the assigned worker/ supervisor/ circuit/ region. It pulls the earliest of the CD or Multi-Disc contact used for initial safety assurance by date worker enters in FACES on the Safety Assessment. A column shows the performance for the worker for all assigned cases. It shows % within 24 hours or within 72 hours for Ed Neglect only.

2. Timely CA/N conclusions

   - Data Source: Quarterly CA/N Worker Analysis Report provided by the Research and Evaluation Unit
   - Staff goal = % of reports concluded within 30 calendar days = 85% or higher
   - As required by Missouri Statute

   Report pulls the date of the conclusion for approved concluded cases only, by worker/ supervisor/ circuit/ region. The data is currently delayed by 3 months to allow sufficient time for conclusions to be entered (i.e.: the report will show data for the year to date up to the end of the previous quarter). Columns on the report show the performance for the worker for all assigned cases by % <31 days and % > 45 days, but raw numbers are available to show the spectrum.

FCS (Intact Families) Staff:

1. Worker visits with parents held (at least one per month)

   - Data source: Quarterly FCS Analysis Report provided by the Research and Evaluation Unit
   - Staff goal = % of visits held with at least one parent every calendar month = 80%

   This report will be produced with a calendar year to date perspective on a case level basis and will indicate if one visit per calendar month with any parent/caregiver on the FCS case occurred. One or more visits for each month will be the "pass" for this report. The FACES contact purpose of "Worker with Parent" is used for retrieving the dates of the visits. Only cases open for a full month will be counted. Staff turnover/ changing case assignments will be accommodated with this report as it will show all workers at any point during the fiscal year period. (Policy note: policy prescribes that the risk level is used to determine the number of required visits with the parents each month which is at a minimum one per month, so this requirement may actually be less than required when considering individual families' risk levels which could require more than one per month).

2. Monthly summaries completed every 30 days

- Data source: Quarterly FCS Analysis Report provided by the Research and Evaluation Unit
- Staff goal = % of monthly summaries completed every calendar month = 90%

Report will indicate if a summary was completed every calendar month for the calendar year-to-date. Report will include the summary month and pass/fail indicator based on if summary was entered within 30 days of "summary through date". Report will include name of assigned worker and supervisor.

AC Staff:

1. Timely PPRT meetings

- Data Source: Results Oriented Management (ROM) Timely PPRT Report
- Staff goal = % of children with timely PPRT meetings = 90%
- PIP related activity

ROM report can be produced by the assigned supervisor at any time desired and drilled down to the case level by worker and supervisor for any time period specified.

2. Worker visits with children held each and every month
   - Data source: Monthly Worker Visits with Child Report provided by the Research and Evaluation Unit
   - Staff goal = % of visits held each and every month child is in care during FY = 90%
   - Federal statute requirement = 90%

This report will be produced monthly with a fiscal year to date perspective on a case level basis and will indicate if one visit per calendar month with each child occurred. One or more missed months will result in a not passing score for the child. The FACES contact purpose of "Worker with Child" is used for retrieving the dates of the visits. Only cases open for a full month will be counted. Staff turnover/ changing case assignments will be accommodated with this report as it will show all workers at any point during the fiscal year period.

Adoption Staff:

1. Completion of assessments of prospective adoptive families within 180 days

- Data source: Adoption Analysis Report provided by the Research and Evaluation Unit
- Staff goal: 80%

A calendar year-to-date report will show the assigned worker/supervisor at the time of the vendor type of ADO/ADR application and the worker's currently assigned supervisor. Measurement used for this outcome is the time lapse from the application status date minus the application received date <= 180 calendar days.

2. Children having a goal of adoption are featured on AdoptUSKids website.

- Data source: AdoptUSKids Comparison Report provided by the Adoption Unit at Central Office
- Staff goal = 75% of children with a goal of adoption have a profile featured on AdoptUSKids.

The report will be based on a quarterly point in time comparison of all children having a case goal of adoption (not placed in pre-adoptive placements) including TPR complete/TPR incomplete with children listed in AdoptUSKids Data Base. The list of children featured and date the child was added to the data base will be provided. The data is currently delayed by 3 months to allow sufficient time for profiles to be entered and for the production of the report (i.e.: the report will show data for the year to date up to the end of the previous quarter).

CANHU Staff:

1. Process a proportionate number of calls (within 2 units below shift average) compared to co-workers on the same/similar shift.

- Data source: Annual Production Report
- Staff goal = 100%

Annual production report is used for calculating this measure on a worker/supervisor level. Monthly performance report will be provided with a year-to-date average.

2. Based on the CANHU Peer Record Review sample, make the correct decision on the acceptance/rejection of a call as a CA/N report on at least 95% of calls. (Data Source: PRR results)
   - Staff goal = 95%

Monthly Peer Record Review results will be used to calculate performance on a worker and supervisor level. Supervisory report with worker performance will be provided and used for measuring the worker performance.

Resource Development Staff:

1. Completion of assessments for relative/kinship providers within 90 days

- Data source: Quarterly Resource Development Analysis Report provided by the Research and Evaluation Unit
- Staff goal: 80%

A calendar year-to-date report will include the assigned resource worker/supervisor at the time of the application and the worker's currently assigned supervisor. Measurement used for this outcome is the time lapse between application date (RHU/KHU) entered in FACES and approval date.

2. Timely re-licensure

- Data source: Quarterly Resource Development Analysis Report provided by the Research and Evaluation Unit
- Staff goal: 80%

A calendar year-to-date report will include the assigned resource worker/supervisor at the time of the renewal and the worker's currently assigned supervisor. Measurement used for this outcome is the timestamp entry of the renewal being =< license expiration date.

<u>**Generic Caseload Staff:**</u>

All of the above which apply

<u>**FCCM Oversight Specialists:**</u>

1. Timely submission of FCCM monthly tracker tool to state oversight coordinator

   - Source of Measurement: Oversight Supervisor manual tracking
   - Goal: 100%

   The measure of timeliness is based on submission to the state oversight coordinator of the FCCM tracker tool by the 10th calendar day of every calendar month.

2. Timely submission of quarterly QI log to state oversight coordinator.
   - Source of Measurement: Oversight Supervisor manual tracking
   - Goal: 100%

   The measure of timeliness is based on submission to the state oversight coordinator of the QI log by the 10th calendar day of the month following the end of each quarter.

<u>**QA Specialists:**</u>

1. Monthly distribution of federal worker visits with children Y-T-D, service worker and transfer month case-level data to Circuit/Program Managers

   - Measurement Source: Quarterly PIP reporting (monthly notification to CFSR calendar in Outlook)
   - Goal = 100%

2. CFSR Outcomes Data provided to Circuit/Program Managers quarterly for PIP planning

   - Measurement Source: Quarterly PIP reporting (monthly notification to CFSR calendar in Outlook)
   - Goal = 100%

<u>**QI Specialists:**</u>

1. Accreditation Maintenance Tool conducted quarterly and accreditation maintenance case read of all program areas conducted at least once per year in each Circuit

   - Measurement Source: QI Unit Manager receipt of quarterly accreditation maintenance tool grid and annual case read summaries
   - Goal = 100%

2. CFSR PIP plans reviewed/revised quarterly according to progress made, and provided to CFSR Coordinator
   - Measurement Source: CFSR Coordinator receipt of quarterly pip plans
   - Goal = 100%

<u>**Other Positions:**</u>

Specialized positions not otherwise specified will be individually determined based on unique job responsibilities.

Supervisor Outcome Measures:

CA/N Program (Supervisors and above only – CA/N program area):

1. Chief Investigator (CI) 72 hour signature completed for CA/N Reports
   - Data Source: Quarterly CA/N Supervisor Analysis Report provided by the Research and Evaluation Unit
   - Supervisor Goal: % of Chief Investigator Signatures within 72 hrs = 80% or higher
   - As required by Missouri Statute

   Quarterly Report will include all CA/N reports received during the Calendar year to date with the report date, the 72-hour CI decision date, and timestamp that decision was entered. The name of the worker assigned to the report, the name of the supervisor who made the 72-hour safety decision and the name of the currently assigned supervisor for that worker will be included on the report along with Circuit/Region Name. The time lapse between the report date and date entered for the 72-hour signature in FACES will be used as the measurement for this outcome.

2. CA/N supervisors will be additionally measured based on average unit performance (for their assigned workers) for the staff program measures above. Supervisor goal remains as indicated for staff.

FCS and AC Programs (Supervisors and above only – FCS and AC program areas):

1. Timely approval of case closes (Report approved by supervisor <=2 business days from date worker submitted report to supervisor in FACES)
   - Data Source: Supervisor Analysis Report provided by the Research and Evaluation Unit
   - Supervisor Goal: 80%
   - PIP related activity

   Quarterly report will provide information for the calendar year of cases submitted for approval for closing. Report will include the assigned FCS/AC supervisor of the case. Measurement will be based on a comparison of the date the worker submits the case to the supervisor in FACES for approval of case closing with the timestamp of the supervisor's approval in FACES <=2 business days.

2. Supervisory Case Review Tool (SCRT) reviews completion rate.
   - Data Source: Quarterly SCRT report provided by the Quality Assurance Unit
   - Goal: 80%
   - PIP related activity

   Quarterly Report will provide the total number of cases selected for SCRT reviews for the assigned case supervisor during the calendar year-to-date with a comparison to the number of reports which were completed (of those selected). Completion is based on the SCRT submitted electronically based on the SCRT review number.

Adoption Program (Supervisors and above only):

   Outcome measures for adoption supervisors will be based on unit performance (for their assigned workers) for the two staff program measures above. Supervisor goal remains as indicated for staff.

CANHU (Supervisors and above only):

Outcome measures for CANHU supervisors will be based on average unit performance (for their assigned workers) for the two staff program measures above. Supervisor goal remains as indicated for staff.

Resource Development (Supervisors and above only):

Outcome measures for resource development supervisors will be based on unit performance (for their assigned workers) for the two staff program measures above. Supervisor goal remains as indicated for staff.

Other Positions (Supervisors and above):

Outcome measures for specialized position supervisors will be based on average unit performance (for their assigned staff) for the individually determined staff measures above based on unique job responsibilities.